

## STEP FOUR

### Implementation

### **Implementation of PFCE Activities**

By Step Four, the Hospital/Clinic has completed a planned, systematic assessment of the current Hospital/Clinic PFCE process.

This assessment may be accomplished by the use of questionnaires with the staff physicians, and all department supervisors, and patients. Based on the information obtained departmental goals and objectives for the PFCE program may be written.

In assessing the current situation as to patient care, all departments should explore:

1. Look at the Hospital/Clinic statement of departmental policies, philosophy, and goals for patient care. Can these goals be met without PFCE? Obtain documents from administration and/or department heads stating the Hospital/Clinic's expectations in these areas.
2. Examine the goals and objectives of the Hospital/Clinic's departments. Which departments have goals that relate to PFCE? Leadership and/or department heads may provide information and/or documentation in this area.

### **PATIENT/FAMILY CARE GIVER PROCESS**

The following areas concerning patients/clients should be covered and analyzed within each department:

1. What are the most common diagnoses of patients that come to the Hospital/Clinic? Obtain this information from the computer operations department (Patient Care Component {PCC}), Contract Health Services department that handles Contract Health Services (CHS), and/or the medical records department. (This should be easily obtained from IHS data.)
2. If hospitalization is required, what is the average length of stay and age of patients with these diagnoses? (This should be easily obtained from IHS data)

The following areas on the patient care process should be examined in each department when developing the individual departmental questionnaire:

1. What information is collected during the patient screening process concerning past health history?
2. What part of this information could be helpful in determining the PFCE needs?
3. Who determines patient care goals?
4. How are the goals revised? Interviewing or requesting completion of questionnaires by the providers of patient care units will be helpful.
5. What information is included in your discharge summary?
6. If your Hospital/Clinic has developed standard care plans, what are their PFCE components?
7. What staff is included in your process of chart audits? Define their roles. Interviewing the members of the audit workgroup will be valuable in the completion of the audit process.
8. How are the populations for development of criteria for chart audits determined?
9. Is PFCE criteria part of the audit?
10. In your completed chart audits, was the PFCE standard met?

The following areas of resources should be examined:

1. What media and materials are currently being used for PFCE? Has the readability level been assessed? Where are they housed? If some of the materials are purchased, where do the funds come from?
2. What media equipment does the hospital own? Could it be used for PFCE? Does the staff know how to use the equipment? Appropriate managers will be able to supply this information.
3. Are funds budgeted for PFCE, staff education, and/or public relations? Leadership should be able to cover this area.
4. What Tribal and local health agencies provide resources, which are available to the Hospital/Clinic?

5. What PFCE activities are performed by private physicians and their office (and/or the Hospital where patients are referred) when they receive a referral from the I/T/U Hospital/Clinic?

The information gathered should be organized so that long-range and short-range goals can be determined. Based on the findings thus far, the following questions should be answered:

1. Which PFCE needs are presently being met?
2. Which PFCE needs are not being met?
3. What are the priorities among the needs determined in the assessments?
4. What groups of patients should be first to have education programs?
5. What members of the staff are particularly interested in PFCE education?
6. Does the Hospital/Clinic have their full complement of staff?
7. Who is responsible/accountable for PFCE?
8. Is the staff aware of the need for confidentiality in PFCE?

### **Departmental Assessment of Current Patient/Family Care Giver Activities**

The Supplement contains examples of Questionnaires that should be completed by each Hospital/Clinic department. These Questionnaires are suggested examples. Each Hospital/Clinic may wish to develop their own Questionnaires.

### **Purpose Of Interview with Each Department Head**

The purpose of an interview about Patient Education with each Department Head is two-fold:

1. To assess current PFCE activities in all departments of any Hospital/Clinic.
2. To help determine future directions for PFCE activities at any Hospital/Clinic.

Interview or use questionnaires of departments to find out what the staff defines as PFCE activities currently being implemented and any changes they would like to see. This could also be accomplished during meetings of department heads, managers, and Hospital/Clinic groups such as the staff nurse meeting. Request what new PFCE programs the Coordinator or members of the committee would like to see implemented.

All employees should answer the Questionnaire concerning confidentiality.

Obtain information, as to: when, by whom and in what form information is being provided to patients as they receive services at the Hospital/Clinic.

Also, ask what information is being asked during the Patient Registration process concerning such issues as third-party insurance, Medicare and Medicaid, alternate resources.

Complete information should be obtained as to what staff has contact with patients during clinic visits, hospital admissions or referrals to outside providers.

Each Department Head might administer two Surveys to staff:

- Sample Survey on "Confidentiality" located in Supplemental Section
- Sample Survey on "Future Directions for PFCE"

**SUBJECT: IN-SERVICE TRAINING OF STAFF**  
**Preparing the Staff to Teach**

PFCE can and should be provided by any number of health staff -- no one should be excluded from providing this service whether it is the physician or the CHR. Decisions about who will be required to do the teaching to the staff depend on the mission, philosophy, goals and objectives of the facility. Developing policies and procedures concerning PFCE will assist in the coordination of PFCE. For example, the Health Educator can teach a newly diagnosed hypertension patient the basic education concerning high blood pressure. The pharmacist can teach the patient about any effects of the high blood pressure medicine, the dietitian can teach about its relationship to diet, and the CHR or Community/Public Health Nurse can follow-up on the patient's progress at home.

All staff can be helpful patient educators when:

- they know exactly what they are to teach
- they are limited to instructional activities rather than *random counseling*;
- as Patient Family, and Caregiver Educators, they are carefully prepared, supervised and guided by established policies and procedures.

Those staff members directly involved in teaching activities need to have a clear understanding of what is expected of them. They should be adequately prepared to do the job and must be evaluated on their performance. Providing patients with planned learning opportunities requires skill that most health professionals do not possess. Personnel that do the actual teaching need an effective orientation to the PFCE system in your facility and preparation in how to implement it. They also need to know how to use any related resources available to them.

The process used to prepare teaching staff is basically the same as that used in educating patients. Writing a staff development teaching module for a target group of personnel responsible for doing the actual teaching is an excellent foundation upon which to build the staff development program you will need.

The educational goals and learning objectives for a sample staff development program are listed below. The content, teaching strategies and evaluation methods can be listed in a teaching plan for the staff target group selected. Special classes, small group discussions, slide/video in-service programs, and "on-the-job" observations are some teaching methods that can be used in implementing the staff development teaching module. The program needs to be repeated on a regular basis for orientation of new staff and reorientation of "old" staff who need to renew their skills.

**Example: Educational goals and learning objectives for a Staff Development Module for PFCE teaching staff.**

*Items with an asterisk (\*\*) are learning objectives that must be fulfilled as minimal preparation for the staff member to become a PFCE teacher. The remaining objectives provide knowledge and skills that improve their ability and increase their effectiveness.*

**GOAL 1:** The staff will be familiar with the PFCE system used by this facility.

At the end of this unit, the staff will be able to:

- discuss the mission, philosophy, and purpose of PFCE in this facility
- recognize the goals and objectives of PFCE in this facility
- \*\* • describe the PFCE system used in this facility
- describe the purpose of a PFCE Lesson Plan
- \*\* • list the major components of a PFCE Lesson Plan

**GOAL 2:** The staff will be familiar with the basic principles of education.

**GOAL 3:** The staff will understand the education process used in teaching patients and their families.

At the end of this unit, the staff will be able to:

- \*\* • assess patient's learning needs
- \*\* • implement teaching methods appropriate to the patient's learning needs
- \*\* • evaluate what the patient has learned
- \*\* • document the educational event

The following questions should be answered concerning the In-Service PFCE training of Staff

1. Who will do the training and what are the credentials of the instructor?
2. How can In-Service PFCE training for personnel be combined with the schedule of the staff?
3. How will you consistently document and track all In-Service training for staff?

The health care institution should include health education functions in their description of appropriate staff positions and should ensure that the staff filling these positions is prepared to carry out their health education function.

Development of PFCE skills should be an integral part of staff orientation and continuing education.

- 1) Documentation: Administration will determine who will maintain, and where, a Master File documenting all hospital/community/clinic-based educational activities will be kept according to specific educational activity, department and individual attendance. After the educational activity has been completed, the department/service sponsoring the activity will submit this documentation to the Master File with a copy to the employee. Each department/service sponsoring the educational activity will also maintain on file documentation of need assessment, objectives, evaluation and attendance. In addition to their signature, all staff should use a unique identification number when signing for CEU/CME's such as a Social Security Number.
- 2) The tracking of all training, all In-Service attended, copies of certificates and/or Continuing Education  
Units and Continuing Medical Education obtained and copies of renewal of licenses or certification should be aggregated into the one central file, the Master File.
- 3) All persons who come into contact with the patient population should take part in staff training sessions – this includes everyone from housekeeping to the physician.
- 4) Evaluation: The general purpose of evaluation is to determine the value of the education provided to the learner. Evaluation of in-house educational activities may be completed on a variety of dimensions but will be in part, based on learner objectives.
- 5) Scheduling: All in-house educational activities will be scheduled through Administration and the specific department/service that is sponsoring the educational activity. Each department is requested to submit a monthly schedule of educational activities to management and administration. A calendar/schedule of departmental activities will be distributed each month.

If the PFCE program is to be for persons with a specific disease, the staff should be educated about etiology of the disease as well as the therapy used and reasons behind its use. Education of the patient, family and/or caregiver should be presented as part of enabling the patient to understand his or her disease and to carry out his or her therapy.

Most medical/clinical staff will probably not be familiar with the principles of education. Some staff may have never had to develop goals and objectives. And although some staff may have participated in the development of goals and objectives, they have probably never written a lesson plan that precisely defines learner objectives. Many staff will find the process of evaluation difficult. Only through In-Service training will some of these staff find assistance.

**Example**  
**DOCUMENTATION OF HOSPITAL/CLINIC/COMMUNITY-BASED EDUCATION**  
**ACTIVITIES**

DEPARTMENT/DISCIPLINE \_\_\_\_\_

MANDATORY TRAINING YES NO MEETING PLACE \_\_\_\_\_

TITLE OF PRESENTATION: \_\_\_\_\_

DATE OF PRESENTATION: \_\_\_\_\_ TIME: \_\_\_\_\_ TO: \_\_\_\_\_

UNDERLINE: MULTIPLE TIMES PRESENTATION OR SINGLE PRESENTATION?

PRESENTER NAME \_\_\_\_\_

PRESENTER'S TITLE/SSN#:(and  
signature)\_\_\_\_\_

IS THIS PRESENTATION A RESULT OF ANY OF THE FOLLOWING: (Please Specify by underlining.) Hospital/Clinic Data or Adverse Outcome Data, Morbidity & Mortality Statistics, Audit or Peer Review Data, Health Records Statistics, Pharmacy, Patient Education, QA, TQM, Infection Control, Safety, Annual Mandatory Training, Other: \_\_\_\_\_

THE PURPOSE OF THIS PRESENTATION IS:

\_\_\_\_\_ New Medical/Pharmacy/Nursing Knowledge  
\_\_\_\_\_ Patient, Family or Caregiver Education needs  
\_\_\_\_\_ Continuing Education  
\_\_\_\_\_ Consultant or Expert Presentation  
\_\_\_\_\_ Presented as a result of evaluations of prior Educational Activities  
\_\_\_\_\_ In response to a Questionnaire/Survey of Target Audience  
\_\_\_\_\_ New Products or Services Available  
\_\_\_\_\_ IHS/Area/Clinic Emphasis Plan  
\_\_\_\_\_ Other: \_\_\_\_\_

At the completion of this presentation, participants should be able to:

\_\_\_\_\_  
\_\_\_\_\_

TESTING: Was a Test Administered to Participants? \_\_\_\_ YES \_\_\_\_ NO

Number of Continuing Education Units or Continuing Medical Education obtained. \_\_\_\_\_

EVALUATION: \_\_\_\_\_ Objectives Met \_\_\_\_\_ Objectives Not Met

(On the back of this form there should be space for the following information)

STAFF Printed Name: SSN#

Signature

Test Score




## QUESTIONNAIRE

The following questionnaire should be completed by all members of the staff as to the future directions for

1. In what direction would you like to see patient education proceed here at the Hospital,  
page.)

2. like to see your department work on in the  
future? (List in order of priority. Continue on the back of this page if you need additional space.)

YES NO DON'T KNOW

The requirement of providing PFCE should be in all Positions

4. YES NO DON'T KNOW  
Hospital/Clinic?

If so, what would its purpose be? Who should be on such a Team?

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6.

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In your opinion what groups of patients should be first to have PFCE education programs?

1st \_\_\_\_\_

2nd \_\_\_\_\_

4<sup>th</sup> \_\_\_\_\_

5<sup>th</sup> \_\_\_\_\_

6<sup>th</sup> \_\_\_\_\_



**Step Four  
Check List  
Implementation**

- \_\_\_ Most common diagnoses of patients determined
- \_\_\_ Average length of stay and age of patients with these diagnoses?
- \_\_\_ Information is collected during the patient screening process concerning past health history?
- \_\_\_ It has been determined what part of this information could be helpful concerning PFCE needs.
- \_\_\_ Patient care goals determined.
- \_\_\_ Are goals revised.
- \_\_\_ Relevant information is included in discharge summary
- \_\_\_ Standard care plans include PFCE components
- \_\_\_ Staff is included in chart audits
- \_\_\_ Populations for development of criteria for chart audits are determined
- \_\_\_ PFCE criteria is part of the audit
- \_\_\_ In chart audits, the PFCE standard are met
- \_\_\_ Media and materials currently being used for PFCRE were examined.
- \_\_\_ Media equipment is inventoried.
- \_\_\_ PFCE budget is developed.
- \_\_\_ It has been determined what Tribal and local health agencies are available to the Hospital/Clinic?
- \_\_\_ PFCE activities performed by private physicians and their office (and/or the Hospital where patients are referred) are scrutinized.

**Departmental Manuals**

- \_\_\_ PFCE needs currently being met
- \_\_\_ PFCE needs are not being met
- \_\_\_ Priorities among the needs determined in the assessments are analyzed.
- \_\_\_ It has been determined which groups of patients should be first to have PFCE programs
- \_\_\_ Hospital/Clinic has their full complement of staff
- \_\_\_ Who is responsible/accountable for PFCE
- \_\_\_ Staff is aware of the need for confidentiality in PFCE
- \_\_\_ Task Force/Team and/or departments or supervisors have administered the survey: *"Future Directions for Patient Education"*

- \_\_\_ The staff is familiar with the PFCE system used by this facility.
  - \_\_\_ Discuss the mission, philosophy, and purpose of PFCE in this facility;
  - \_\_\_ Recognize the goals and objectives of PFCE in this facility
  - \_\_\_ Describe the PFCE system used in this facility
  - \_\_\_ Describe the purpose of a PFCE Lesson Plan
  - \_\_\_ List the major components of a PFCE Lesson Plan
- \_\_\_ Staff know exactly what they are to teach.
- \_\_\_ Staff are limited to instructional activities rather than random counseling
- \_\_\_ As patient educators, they are carefully prepared, supervised and guided by established policies and procedures.
- \_\_\_ Facility has established policies and procedures for Hospital/Clinic based (in-house) PFCE
- \_\_\_ Staff attended In-Service training specific to developing lesson plans:
  - \_\_\_ Assess patient's learning needs
  - \_\_\_ Write a teaching plan for individual patients
  - \_\_\_ How to develop goals and objectives
  - \_\_\_ Implement teaching methods appropriate to learning objectives, related content and the patient's situation
  - \_\_\_ Evaluate what the patient has learned
  - \_\_\_ Document the educational event
- \_\_\_ Teaching or lesson plans are centered on the most common diagnoses
- \_\_\_ Teaching or Lessons plan format is compatible with all the plans in the facility as to type of format form and content.
- \_\_\_ Teaching or Lessons Plans include:
  - \_\_\_ The Learner
  - \_\_\_ Goals
  - \_\_\_ Measurable Objectives
  - \_\_\_ A teaching plan
  - \_\_\_ Evaluation
  - \_\_\_ Documentation
  - \_\_\_ A Support Package
  - \_\_\_ How to determine and develop a Resource Support Packet
- \_\_\_ Staff is familiar with the basic principles of education.
- \_\_\_ In-Service patient Education training for personnel has been incorporated with the schedule of the staff
- \_\_\_ All In-Service training for staff is documented.
- \_\_\_ A form that is acceptable to all disciplines has been developed to document In-Service Education provided by this facility.